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CONFIRMATION NO. 4543

Bib Data Sheet

SERIAL NUMBER 10/762,419	FILING DATE 01/22/2004 RULE	CLASS 297	GROUP ART UNIT 3636	ATTORNEY DOCKET NO. 2004-2103.ORI
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/442,163 01/22/2003 SD

** FOREIGN APPLICATIONS *****

NONE SD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/26/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>SD</i> <i>SD</i> Examiner's Signature Initials	MN	9	11	1

ADDRESS

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TITLE

Rotatable child safety seat

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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